

PATENT ASSIGNMENT

Electronic Version v1.1
Stylesheet Version v1.1

SUBMISSION TYPE:

NEW ASSIGNMENT

NATURE OF CONVEYANCE:

LIEN

CONVEYING PARTY DATA

Name	Execution Date
Federal Law Enforcement Development Services, Inc.	01/25/2010

RECEIVING PARTY DATA

Name:	Vidas, Arrett & Steinkraus, P.A.
Street Address:	6640 Shady Oak Road
Internal Address:	Suite 400
City:	Eden Prairie
State/Country:	MINNESOTA
Postal Code:	55344

PROPERTY NUMBERS Total: 11

Property Type	Number
Application Number:	12750796
Application Number:	61165546
Application Number:	12126342
Application Number:	12126227
Application Number:	12126589
Application Number:	12126469
Application Number:	12126647
Application Number:	12126529
Application Number:	12032908
Patent Number:	7046160
Patent Number:	6879263

CORRESPONDENCE DATA

Fax Number: (952)563-3001

Correspondence will be sent via US Mail when the fax attempt is unsuccessful.

501225298

PATENT
REEL: 024640 FRAME: 0447

OP \$440.00 12750796

Phone:	952-563-3000
Email:	evoigt@vaslaw.com
Correspondent Name:	Vidas, Arrett & Steinkraus, P.A.
Address Line 1:	6640 Shady Oak Road
Address Line 2:	Suite 400
Address Line 4:	Eden Prairie, MINNESOTA 55344

ATTORNEY DOCKET NUMBER:	N53.2-13713-US01
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NAME OF SUBMITTER:	Edwin E. Voigt II
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Total Attachments: 4
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source=13713US01_ucc_20100125#page3.tif
source=13713US01_ucc_20100125#page4.tif

Uniform Commercial Code
60 Empire Drive, Suite 100
Saint Paul, MN 55155



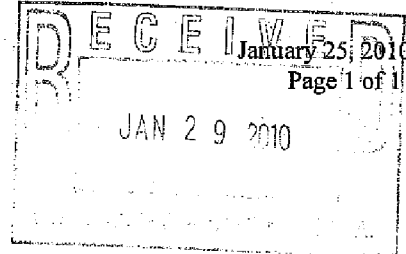
Mark Ritchie
Secretary of State

406 398780
N53.1-13713-4501

Minnesota Central Filing System

UCC Filing Acknowledgement

Vidas, Arrett & Steinkraus. P.A.
6640 Shady Oak Road
Suite 400
EDEN PRAIRIE MN 55344



The Minnesota Central Filing System has received and filed your document. The information below reflects the data that was indexed in our system. Please review the information for accuracy. If you find a potential error, please notify the appropriate filing office.

Client Account Number: 66581127

Batch Number: 3682266

Filing Type: UCC Financing Stmt

Original Filing Number: 201018869779

Filed Date: 01/25/2010

Filed Time: 3:05 p.m.

Lapse Date: 1/25/2015

Party Type

Party Name and Address

Debtor

**FEDERAL LAW ENFORCEMENT DEVELOPMENT
SERVICES INC
SAINT CLOUD MN**

Secured Party

**VIDAS ARRETT & STEINKRAUS PA
EDEN PRAIRIE MN**

Filing by the Minnesota Central Filing System is not conclusive proof that all conditions for securing priority have been met. Ensuring that accurate information is on the document to be filed is the responsibility of the filing party. If the filing is challenged, the filing office does not guarantee that the filing is legally sufficient to secure priority under UCC Article 9 and expressly disclaims any liability for failure of the filing party to secure priority resulting from the information contained in the filed document, or the lack of information on the filed document.

User ID: boono01

County ID: 88



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TTY (800) 627-3529

**PATENT
REEL: 024640 FRAME: 0449**

Filing NO: 201018869779
Filing Date: 2010/01/25
Filing Time: 3:05 PM
State of Minnesota
Processing Office: Secretary of State
Filed by: boono01

UCC FINANCING STATEMENT

FOLLOW INSTRUCTIONS (front and back) CAREFULLY

A. NAME & PHONE OF CONTACT AT FILER (optional)

B. SEND ACKNOWLEDGMENT TO: (Name and Address)

Edwin E. Voigt II, Esq.
Vidas, Arrett & Steinkraus, P.A.
6640 Shady Oak Road, Suite 400
Eden Prairie, MN 55344

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (1a or 1b) - do not abbreviate or combine names

1a. ORGANIZATION'S NAME

Federal Law Enforcement Development Services, Inc.

OR

1b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

1c. MAILING ADDRESS

621 Roosevelt Road

St. Cloud

STATE

POSTAL CODE

COUNTRY

MN

56301

US

1d. SEE INSTRUCTIONS

ADD'L INFO RE
ORGANIZATION
DEBTOR

1e. TYPE OF ORGANIZATION
Corporation

1f. JURISDICTION OF ORGANIZATION
D.C.

1g. ORGANIZATIONAL ID #, if any

☒ NONE

2. ADDITIONAL DEBTOR'S EXACT FULL LEGAL NAME - Insert only one debtor name (2a or 2b) - do not abbreviate or combine names

2a. ORGANIZATION'S NAME

OR

2b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

2c. MAILING ADDRESS

CITY

STATE

POSTAL CODE

COUNTRY

2d. SEE INSTRUCTIONS

ADD'L INFO RE
ORGANIZATION
DEBTOR

2e. TYPE OF ORGANIZATION

2f. JURISDICTION OF ORGANIZATION

2g. ORGANIZATIONAL ID #, if any

☐ NONE

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR S/P) - Insert only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

Vidas, Arrett & Steinkraus, P.A.

OR

3b. INDIVIDUAL'S LAST NAME

FIRST NAME

MIDDLE NAME

SUFFIX

3c. MAILING ADDRESS

6640 Shady Oak Road, Suite 400

Eden Prairie

STATE

POSTAL CODE

COUNTRY

MN

55344

US

4. This FINANCING STATEMENT covers the following collateral:

Attorney's Lien for:

All intangible assets and intellectual property of debtor now owned or herein after acquired which are or may be used in connection with debtor's business. Expenses incurred for patent and trademark matters totaling \$75,799.76. A lien filed pursuant to Chapter 514.

5. ALTERNATIVE DESIGNATION (if applicable)	LESSOR/LESSOR	CONSIGNEE/CONSIGNOR	BAILEE/BAILO	SELLER/BUYER	AG. LIEN	NON-UCC FILING
6. THIS FINANCING STATEMENT is to be filed (or record) in the REAL ESTATE RECORDS. Attach Affidavit (if applicable)	7. Check to REQUEST SEARCH REPORT (S) on Debtor(s) (ADDITIONAL FEE) (optional)		At Debtors Debtor 1 Debtor 2			
8. OPTIONAL FILER REFERENCE DATA						

FILING OFFICE COPY — UCC FINANCING STATEMENT (FORM UCC1) (REV. 05/22/02) International Association of Commercial Administrators (IACA)

Uniform Commercial Code
60 Empire Drive, Suite 100
Saint Paul, MN 55103



Mark Ritchie
Secretary of State

Office of the Secretary of State
Packing Slip

January 25, 2010

Vidas, Arrett & Steinkraus, P.A.
EDWIN E VOIGT II
6640 Shady Oak Road
Suite 400
EDEN PRAIRIE, MN 55344

Page 1 of 1

Client Account Number: 66581127
Batch Number: 3682266

Document Number	Document Detail	Filing Number	Fee
36822660002	UCC1 Standard	201018869779	20.00

Total Fees **\$20.00**

<u>Payment Type Received</u>	<u>Payment Reference Number</u>	<u>Amount Paid</u>
Check	20271	20.00
Total Payments Received		\$20.00

Any overage amount on account with our agency will be refunded after 60 days if not used.



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(651) 296-2803

TTY (800) 627-3529

PATENT
REEL: 024640 FRAME: 0451

The balance of the account as of July 7, 2010 is \$78,381.86.